

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2004

Application or Docket Number

09/987364

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	1/5/5	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* 17	Minus	** 20
Independent	* 3	Minus	*** 3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE	OTHER THAN OR SMALL ENTITY
RATE	Fee
BASIC FEE	395.00
<input type="checkbox"/>	<input type="checkbox"/>
X 25	
<input type="checkbox"/>	<input type="checkbox"/>
X 50	
<input type="checkbox"/>	<input type="checkbox"/>
X 100	
<input type="checkbox"/>	<input type="checkbox"/>
X 200	
<input type="checkbox"/>	<input type="checkbox"/>
+180	
<input type="checkbox"/>	<input type="checkbox"/>
+360	
TOTAL	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
OR TOTAL	<input type="checkbox"/>

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total		Minus	**
Independent		Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY	OTHER THAN OR SMALL ENTITY
RATE	ADDI- TIONAL FEE
<input type="checkbox"/>	<input type="checkbox"/>
X 25	
<input type="checkbox"/>	<input type="checkbox"/>
X 50	
<input type="checkbox"/>	<input type="checkbox"/>
X 100	
<input type="checkbox"/>	<input type="checkbox"/>
X 200	
<input type="checkbox"/>	<input type="checkbox"/>
+180	
<input type="checkbox"/>	<input type="checkbox"/>
+360	
TOTAL	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
OR ADDIT. FEE	<input type="checkbox"/>

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	*	Minus	**
Independent	*	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY	OTHER THAN OR SMALL ENTITY
RATE	ADDI- TIONAL FEE
<input type="checkbox"/>	<input type="checkbox"/>
X 25	
<input type="checkbox"/>	<input type="checkbox"/>
X 50	
<input type="checkbox"/>	<input type="checkbox"/>
X 100	
<input type="checkbox"/>	<input type="checkbox"/>
X 200	
<input type="checkbox"/>	<input type="checkbox"/>
+180	
<input type="checkbox"/>	<input type="checkbox"/>
+360	
TOTAL	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
OR ADDIT. FEE	<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.